

**立法會**  
**Legislative Council**

LC Paper No. CB(2)199/14-15

(These minutes have been  
seen by the Administration)

Ref : CB2/PL/HS

**Panel on Health Services**

**Minutes of special meeting  
held on Monday, 23 December 2013, from 9:00 am to 1:15 pm  
in Conference Room 1 of the Legislative Council Complex**

**Members present** : Dr Hon LEUNG Ka-lau (Chairman)  
Prof Hon Joseph LEE Kok-long, SBS, JP, PhD, RN (Deputy Chairman)  
Hon Vincent FANG Kang, SBS, JP  
Hon WONG Ting-kwong, SBS, JP  
Hon CHAN Kin-por, BBS, JP  
Hon CHEUNG Kwok-che  
Hon Albert CHAN Wai-yip  
Hon Charles Peter MOK  
Hon CHAN Han-pan  
Hon Alice MAK Mei-kuen, JP  
Dr Hon KWOK Ka-ki  
Dr Hon Fernando CHEUNG Chiu-hung  
Dr Hon Helena WONG Pik-wan  
Dr Hon Elizabeth QUAT, JP  
Hon POON Siu-ping, BBS, MH  
Dr Hon CHIANG Lai-wan, JP

**Members absent** : Hon Albert HO Chun-yan  
Dr Hon Priscilla LEUNG Mei-fun, SBS, JP  
Hon Mrs Regina IP LAU Suk-yee, GBS, JP

**Public Officers : Item I  
attending**

Professor Sophia CHAN Siu-chee, JP  
Under Secretary for Food and Health

Mr Chris SUN Yuk-han, JP  
Head, Healthcare Planning and Development Office  
Food and Health Bureau

Dr Sarah CHOI Mei-yee, JP  
Assistant Director of Health (Special Health Services)  
Department of Health

Dr Teresa LI Mun-pik  
Principal Medical and Health Officer (5)  
Department of Health

**Attendance by invitation** : Hong Kong Medical and Healthcare Device Industries Association

Ir Dr Andros CHAN  
Deputy Chairman

The Hong Kong Medical Association

Dr TSE Hung-hing  
President

The Society of Hospital Pharmacists of Hong Kong

Mr William CHUI Chun-ming  
President

Hong Kong Academy of Medicine

Professor LAU Chak-sing  
Vice-President (Education and Examinations)

The Hong Kong College of Otorhinolaryngologists

Dr John WOO Kong-sang  
President

Association of Private Medical Specialists of Hong Kong

Dr Samuel KWOK Po-yin  
President

The Hong Kong Physiotherapy Association

Dr Kris WONG  
Chairperson of the Electrophysical Therapy Specialty Group

Hong Kong Sanatorium & Hospital

Dr Raymond YUNG  
Assistant Medical Superintendent

The Hong Kong Society of Dermatology and Venereology

Dr YEUNG Chi-keung  
Chairman

Hong Kong Beauty and Fitness Professionals General Union

Ms Amy HUI Wai-fung  
Chairman

Hong Kong International Professional Trainers Association

Professor LEUNG Chung-lam  
Vice President

Hong Kong Beauty Management & Development Association

Ms Winnie MA Ying-kam  
President

The Hong Kong College of Pathologists

Dr Michael WONG Lap-gate  
Council Member

Beautiful Locations Limited

Mr David YIP  
Director

The College of Surgeons of Hong Kong

Dr WONG Sau-yan  
Representative

Hong Kong Doctors Union

Dr YEUNG Chiu-fat  
President

Hong Kong Society of Plastic, Reconstructive & Aesthetic Surgeons

Dr Daniel LEE  
President

Hong Kong Beauty and Hair Care Employees' Union

Miss Ivy SIN  
Chairman

Beautisky International Limited

Miss LI Wing-sze  
Personal Assistant

International CICA Association of Esthetics, CIDESCO Section China

Ms Shelly LUK  
President

Hong Kong Private Hospitals Association

Dr Peter PANG Chi-wang  
Representative

Hong Kong Association of Professional Aestheticians International

Ms Teresa TSOI  
Executive Consultant

Vocational Training Council

Mr PANG Kam-chiu  
Chairman of the Beauty Care and Hairdressing Training Board

Federation of Beauty Industry (H.K.)

Ms Candy CHU  
Secretary

The Cosmetic & Perfumery Association of Hong Kong

Mr Joseph HO Siu-chung  
Chairman

Hong Kong Beauty Press Limited

Mr Nelson IP  
Editor in Chief

Hong Kong Hair & Beauty Merchants Association

Ms Carmen PANG Yuk-ling  
President

Hong Kong College of Physicians

Dr HO King-man  
Past Chairman, Specialty Board in Dermatology & Venereology

Consumer Council

Ms Rosa WONG  
Head, Research & Trade Practices Division

Hong Kong Dental Association

Dr Sigmund LEUNG Sai-man, JP  
President

The College of Ophthalmologists of Hong Kong

Dr Hunter YUEN Kwok-lai  
Council Member

The Federation of Medical Societies of Hong Kong

Dr NG Yin-kwok  
2nd Vice-President

The Hong Kong College of Family Physicians

Dr Billy CHIU Chi-fai  
Honorary Secretary

The Provisional Hong Kong Academy of Nursing

Dr Sylvia FUNG Yuk-kuen, BBS  
Vice President

The Beauty Company, Limited

Ms Coco NG Sau-man  
Operation Manager

Full Moral Technology & Cosmetic

Mr PUN Shi-hoi  
General Manager

Mandy Group Limited

Ms Mandy CHU  
Managing Director

團結美容業界關注小組

Ms SUNG Siu-kin  
Committee Member

Farida Professional Academy of Aesthetics

Ms Fenny FARIDA  
Principal

Asia Pacific Beauty Group Limited

Ms Anna CHAN  
Director

Elsa Pun Beauty & Slimming Institute

Ms Elsa PUN  
Principal

Pretty House Group

Mr Ivan LEE  
Chief Executive Officer

Ms LEUNG Kwok-ying

NEO DERM (HK) Limited

Mr LIM Meng-teng  
Managing Director

Beauty Industry Reform Research and Development Committee

Ms Juliana YANG  
Member

The Beauty Group International Limited

Miss Angela CHAN  
School Manager

Good Union Corporation Limited

Mr CHENG Yeung  
General Manager

Hong Kong Qualified Standard Beauty Association

Miss MA Shuk-ha  
Chief Consultant

Neo Skin Lab

Miss TAI Man-yee  
Manager

Democratic Party

Mr OR Yiu-lam  
Spokesman

Democratic Alliance for the Betterment and Progress of Hong Kong

Mr YIP Man-pan  
Deputy Spokesperson of Health Services

Hong Kong College of Dermatologists

Dr Henry HL CHAN  
Vice-President

Li Ka Shing Faculty of Medicine, The University of Hong Kong

Professor LAW Wai-lun  
Associate Dean (Clinical Affairs)

Faculty of Medicine, The Chinese University of Hong Kong

Professor Francis K L CHAN  
Dean

Hong Kong Association of Cosmetic Surgery

Dr Walter KING Wing-keung  
Former President

Hong Kong Surgical Laser Association

Dr Moniz WONG  
President

Hong Kong Hair Dressing & Make-up Trade Workers General Union

Ms Rinbo CHAN  
Vice Chairman

Service Industry General Union

Mr Ken TONG  
Chairman

Hospital Authority

Dr LEUNG Chau-mau  
Senior Manager (Clinical Effectiveness) Quality & Safety Division

**Clerk in attendance** : Ms Maisie LAM  
Chief Council Secretary (2) 5



**Staff in attendance** : Ms Mina CHAN  
Senior Council Secretary (2) 5

Ms Priscilla LAU  
Council Secretary (2) 5

Ms Michelle LEE  
Legislative Assistant (2) 5

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**I. Recommendations of the Working Group on Differentiation between Medical Procedures and Beauty Services**

[LC Paper Nos. CB(2)254/13-14(05), CB(2)532/13-14(01) to (22), CB(2)552/13-14(01) to (06), CB(2)574/13-14(01) to (11) and CB(2)597/13-14(01) and (02)]

Members noted the following papers on the subject under discussion -

- (a) the Administration's paper entitled "Recommendations of the Working Group on Differentiation between Medical Procedures and Beauty Services of the Steering Committee on Review of Regulation of Private Healthcare Facilities and the Administration's Implementation Plan" (LC Paper No. CB(2)254/13-14(05));
- (b) the Administration's response to the motion passed and issued raised by the Panel under the agenda item on "Regulation of medical beauty treatments or procedures" of the meeting on 18 November 2013 (LC Paper No. CB(2)532/13-14(01)); and
- (c) the updated background brief entitled "Regulation of medical beauty treatments/procedures" prepared by the Legislative Council Secretariat (LC Paper No. CB(2)532/13-14(02)).

Views of deputations

2. At the invitation of the Chairman, a total of 59 deputations presented their views on recommendations of the Working Group on Differentiation between Medical Procedures and Beauty Services ("the Working Group"). Members also noted the written submissions from the following individuals and organization not attending the meeting -

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- (a) Mr CHAO Chen-kuo;
- (b) Hong Kong College of Community Medicine;
- (c) Hong Kong Chiropractors Association; and
- (d) Civic Party.

A summary of the views of deputations is in the **Appendix**.

The Administration's response to the views expressed by deputations

3. Responding to the views expressed by the deputations, Under Secretary for Food and Health ("USFH") made the following points -

- (a) most of the practices of the beauty industry were non-invasive and involved no or very little health risks that called for direct, regulatory intervention. Instead of regulating the beauty industry indiscriminately, the Administration had adopted a risk-based approach focusing on those procedures or treatments that were intrinsically risky and could cause considerable harm to clients if not properly administered by qualified personnel;
- (b) the Working Group set up under the Steering Committee on Review of the Regulation of Private Healthcare Facilities ("the Steering Committee") had examined the risks of 35 types of cosmetic procedures. Based on the level of risks associated with these procedures, the Working Group had recommended that to better safeguard public health, cosmetic procedures involving injections; mechanical or chemical exfoliation of the skin below the epidermis; hyperbaric oxygen therapy; and dental bleaching or teeth whitening ("the four procedures") should only be performed by registered medical practitioners or registered dentists. The recommendations had been endorsed by the Steering Committee. The Administration had followed up on the Working Group's recommendations and would take enforcement actions as necessary under the Medical Registration Ordinance (Cap. 161) and the Dentists Registration Ordinance (Cap. 156);
- (c) as regards procedures involving the use of medical devices, particularly energy-emitting devices, the regulatory approach to these procedures could be deliberated within the regulatory framework for medical devices the set up of which was currently under review. The Administration planned to report to the Panel

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on the outcome of the study on business impact of the proposed statutory regulatory regime on the trade in the first half of 2014. It would also engage a consultant to conduct an in-depth study on the regulatory framework of cosmetic-related medical devices by making reference to overseas practices, and would conduct wider consultation with stakeholders before finalizing the detailed regulatory requirements; and

- (d) with a view to encouraging industry self-regulation and protecting consumer rights, the Consumer Council joined hands with industry representatives and prepared a Code of Trade Practices for the beauty industry in 2006. The Trade Descriptions (Unfair Trade Practices) (Amendment) Ordinance 2012, which had come into full implementation on 19 July 2013, further strengthened the protection of consumers of beauty services against unfair trade practices. This apart, the Education Bureau had assisted the beauty industry to formulate its Specification of Competency Standards ("SCS"), which set out the competency requirements and outcome standards required of the industry at various levels under the Qualifications Framework ("QF").

Discussion

*Regulation of medical beauty treatments or procedures*

4. Miss Alice MAK said that The Hong Kong Federation of Trade Unions was supportive of the issuance of advisory notes to the beauty service providers advising them to refrain from performing the four procedures classified as medical treatment if they were not themselves registered medical practitioners or registered dentists in order to safeguard patient safety. The Federation also sympathized with frontline doctors and beauty practitioners, who had become the scapegoats since the occurrence of the adverse incident in October 2012 involving invasive procedures in a beauty parlour. She sought view from Dr TSE Hung-hing of The Hong Kong Medical Association on whether there would be no room for co-operation between doctors and beauty services companies. Mr CHAN Han-pan enquired whether such co-operation would be taken as professional misconduct of a medical practitioner, which might lead to disciplinary proceedings by the Medical Council of Hong Kong ("MCHK"). Holding the view that the adverse incident in October 2012 was caused by the misconduct on the part of the doctors concerned, Mr CHAN Han-pan and Mr Vincent FANG cast doubt on whether the proposal of identifying procedures or treatments that could only be performed by registered medical practitioners could prevent the occurrence of such incidents.

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5. Dr TSE Hung-hing of The Hong Kong Medical Association explained that doctors were involved in various aesthetic practices, which included, among others, plastic and reconstructive surgery. However, there should not be room for co-operation between doctors and the beauty industry as this was not permitted by the Code of Professional Conduct issued by MCHK. He urged the Administration to draw a line to clearly differentiate between beauty treatment and medical procedures under the existing legislation. He pointed out that the advisory notes failed to address the problem as they did not bind beauty services companies in making known to the customer the name of the medical practitioner performing the treatment. MCHK was unable to handle complaints without the name of the doctor concerned provided by the complainant.

6. Mr POON Siu-ping sought elaboration from Mr YIP Sai-hung of Hong Kong Beauty Press Limited about his views on the Working Group's recommendations. Mr YIP Sai-hung clarified that he did not disapprove all the recommendations made by the Working Group, but was dissatisfied that such recommendations were based on a discussion without a sound basis as the beauty sector was underrepresented in the Working Group. The Working Group had revealed its double standards and misconceptions in classifying medical procedures. Citing body tattooing and piercing as example, he pointed out that these procedures, which might lead to bleeding and would not be performed by beauticians, were however exempted from being regarded as medical treatment only due to the conception that they were traditionally deemed non-medical procedures. Dr CHIANG Lai-wan and Mr Vincent FANG echoed the same view that the Working Group was largely composed of medical practitioners, leaning to the opinions in favour of the medical sector. Miss Alice MAK urged the Administration to engage the beauty industry in taking forward the Working Group's recommendations.

7. Pointing out that the adverse incident in October 2012 involved a beauty services company providing high-risk medical procedures under the disguise of cosmetic services, Dr CHIANG Lai-wan and Mr Vincent FANG shared the view that the performance of high-risk medical procedures or practices for beauty purposes should be confined to the hospital setting. Mr CHEUNG Kwok-che and Miss Alice MAK expressed concern over the regulation of medical or clinical laboratories given that the adverse incident involved a laboratory processing health products for advanced therapies. USFH advised that the other working groups set up under the Steering Committee were examining the above issues. The Administration planned to revert to the Panel on their recommendations in 2014.

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*Proposed regulatory framework for medical devices*

8. Miss Alice MAK sought clarification from Dr PANG Chi-wang of Hong Kong Private Hospitals Association as to whether the performance of cosmetic procedures involving the use of energy-emitting devices such as lasers, and invasive cosmetic procedures such as hair transplantation and "double eyelid surgery" (blepharoplasty), was restricted to specialist doctors from the relevant medical disciplines. Dr CHIANG Lai-wan expressed a similar concern. Mr Albert CHAN was also concerned about the qualification requirements for doctors to perform various aesthetic procedures.

9. Citing dermatology as an example, Dr PANG Chi-wang of Hong Kong Private Hospitals Association explained that to become a dermatologist, one was required to undergo five years of medical study, one year of practice and at least six years of specialist training. Specialists also had to undergo continuous medical education relevant to their specialties to keep themselves updated on current developments in medical practice so as to maintain a high professional standard. It should be noted that private hospitals would not allow doctors to perform procedures or treatments outside their relevant specialties. Doctors who do so in other settings would also be subject to disciplinary actions imposed by MCHK. On the use of medical devices, he pointed out that while it was difficult to define and classify medical devices due to the rapid technological development, specialist doctors would make professional judgement with their medical knowledge on the safety, technical functionality and reliability of individual medical devices.

10. Mr CHEUNG Kwok-che invited views from the medical sector on introducing across-the-board regulation of medical devices, particularly those used for beauty purposes. Dr Helena WONG said that the Democratic Party supported the proposal of setting up a registration system for medical devices. She sought views from deputations, especially Dr Henry CHAN of Hong Kong College of Dermatologists, on the proposed regulation as well as the differentiation between medical device and cosmetic-related device.

11. Dr Henry CHAN of Hong Kong College of Dermatologists did not agree that the medical devices be regulated across the board. In his view, the classification of medical devices should be considered on a case-by-case given that there was a large number of counterfeit medical equipment in the market. Dr Moniz WONG of Hong Kong Surgical Laser Association took the view that the operation of Class 3B and Class 4 high-power medical lasers should be limited to registered medical practitioners or registered dentists. Dr Walter KING of Hong Kong Association of Cosmetic Surgery remarked that in formulating the regulatory framework for medical devices, more

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emphasis should be placed on protecting the safety and health of the frontline operators of laser equipment.

12. Dr KWOK Ka-ki urged the Administration not to drag its feet in coming up with a timetable for regulating the use of cosmetic-related medical devices such as laser and intense pulsed light ("IPL") devices, which many members had called for years. Holding the view that public health and safety should be prioritized ahead of commercial interest, he called for the early introduction of the legislation. Mr Vincent FANG took the view that there should be a clear definition of medical device first such that procedures involving the use of equipment classified as medical device would be regarded as medical practice that should be restricted to medical practitioners having appropriate training, whereas the use of those devices falling outside the definition should be open to all trained operators including beauticians. He suggested that the level of control should be proportional to the degree of risk associated with a device. Consideration could be given to allowing qualified personnel to use and operate laser equipment below Class 3B so that the livelihood of frontline beauticians would not be adversely affected by the proposed regulation. Miss Alice MAK noted that for the beauty industry, the competency to operate optical beauty equipment such as laser and IPL devices was a level 4 qualification recognized under QF. Mr CHEUNG Kwok-che also expressed concern on the differentiation between medical device and cosmetic-related device. USFH took note of members' concern.

*Regulation of the beauty industry and its practitioners*

13. Dr Helena WONG said that the Panel passed a motion at the meeting on 18 November 2013 urging the Administration to set up a steering committee on regulation of beauty industry in order to ensure the safety and confidence of people in using beauty services and assist the industry in formulating a comprehensive set of regulatory and training regime for the profession, as well as to establish a qualifications framework for beauticians so as to sustain the healthy development of the industry and enhance the competence of practitioners. She called on the Food and Health Bureau ("FHB") to coordinate the joint efforts across bureaux, including the Commerce and Economic Development Bureau ("CEDB"), Security Bureau and Education Bureau, in promoting the regularization and professionalism of the beauty industry. Mr POON Siu-ping and Miss Alice MAK expressed a similar view. Dr CHIANG Lai-wan was concerned that confining the performance of high-risk procedures for cosmetic purposes by registered medical practitioners would bring about adverse impacts to the livelihood of beauty practitioners and the availability of reasonably priced beauty services for consumers.

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14. USFH responded that the beauty industry, like most other industries and businesses in Hong Kong, ran and evolved in a free-market environment subject to laws and regulations of business or trade in general. She reiterated that most of the practices of the beauty industry were non-invasive and involved no or very little health risks that called for direct, regulatory intervention. Instead of regulating the beauty industry indiscriminately, the Administration considered that the concern over public safety and health could be addressed by identifying those high-risk procedures that should only be performed by qualified personnel through the adoption of risk-based approach. Referring to the Administration's written response to the motion circulated to Panel members vide LC Paper No. CB(2)532/13-14(01) on 19 December 2013, the Chairman advised members that the Administration would put on hold the suggestion of setting up a steering committee on regulation of beauty industry. Mr Vincent FANG remarked that the introduction of a stringent regulatory control system on cosmetic-related devices would have the same effect of regulating the beauty industry. Dr CHIANG Lai-wan considered that instead of FHB, CEDB was in a more appropriate position to address the issue on the setting up of a steering committee to regulate the beauty industry.

15. Mr Albert CHAN sought views from the beauty sector on the promotion of the professionalism of the beauty industry, which involved a variety of areas of specialization. Dr CHIANG Lai-wan raised a similar concern. Mr HO Shiu-chung of The Cosmetic and Perfumery Association of Hong Kong advised that the Code of Trade Practices prepared jointly by the beauty industry and the Consumer Council for the industry had covered various operational aspects of the beauty industry, including, among others, the professional conduct of beauty practitioners. In addition, the beauty industry had developed very early QF for the industry, but the Administration had dragged its feet on responding to the industry's call for further promotion of the professional development of the trade.

16. Miss Alice MAK and Mr CHEUNG Kwok-che asked whether consideration could be given to adopting and recognizing the competency standards under QF as professional qualifications required of employees of the beauty industry to perform those cosmetic procedures involved. USFH reiterated that in view of the public safety and the risk-based principle, beauty procedures or treatments of a high-risk nature should only be performed by registered medical practitioners.

*Regulation over the operation of beauty services companies*

17. Miss Alice MAK were gravely concerned about the measures put in place by the Administration to combat unscrupulous beauty business owners who hired doctors or beauticians to perform high-risk procedures under the

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cover of cosmetic treatments. Dr KWOK Ka-ki expressed a similar concern. USFH advised that since the occurrence of the adverse incident in October 2012, the Department of Health ("DH") had stepped up screening of advertisements of beauty services. As at 16 December 2013, DH had conducted inspections on 67 beauty services companies which publicized themselves as providing cosmetic injections. Of which, 58 claimed that the relevant procedure was performed by registered medical practitioners and the remaining nine indicated that they had ceased to provide the procedure concerned. So far, no non-compliant cases were found.

18. Dr KWOK Ka-ki urged the Administration to step up the enforcement of the Undesirable Medical Advertisements Ordinance (Cap. 231 ("the Ordinance")) against unscrupulous trade practices in the beauty industry such as making exaggerated claims relating to beauty. He considered the existing legislation a toothless tiger, failing to regulate those beauty services companies providing high-risk medical procedures under the disguise of cosmetic services. Pointing out that the Ordinance prohibited the advertising of medicines, surgical appliances or treatment for prevention of certain diseases or the surgical alteration of a person's appearance, USFH undertook to provide after the meeting the statistics of various enforcement actions taken under the Ordinance in the past five years.

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*Public education*

19. Dr KWOK Ka-ki called on the Administration to step up its promotional and education efforts to raise public awareness of the inherent risks involved in cosmetic procedures and unscrupulous business practices in the beauty industry. USFH responded that efforts had been and would continuously be made by DH in enhancing the public education in this regard.

Conclusion

20. In closing, the Chairman requested the Administration to revert to the Panel in due course the progress on the outcome of the review on the regulation of private healthcare facilities and the proposed regulatory regime for medical devices.

21. There being no other business, the meeting ended at 1:07 pm.



## Panel on Health Services

**Summary of views and concerns expressed by deputations  
for the special meeting on Monday, 23 December 2013**

Organization/Individual	Major views and concerns
<b>Recommendations made by the Working Group on Differentiation between Medical Procedures and Beauty Services of the Steering Committee on Review of Regulation of Private Healthcare Facilities</b>	
<ul style="list-style-type: none"> <li>• Association of Private Medical Specialists of Hong Kong</li> <li>• Consumer Council</li> <li>• The College of Ophthalmologists of Hong Kong</li> <li>• Democratic Alliance for the Betterment and Progress of Hong Kong</li> <li>• Faculty of Medicine, The Chinese University of Hong Kong</li> <li>• The Federation of Medical Societies of Hong Kong</li> <li>• Hong Kong Academy of Medicine</li> <li>• Hong Kong Association of Cosmetic Surgery</li> <li>• Hong Kong Chiropractors Association</li> <li>• Hong Kong College of Community Medicine</li> <li>• Hong Kong College of Dermatologists</li> <li>• The Hong Kong College of Family Physicians</li> </ul>	<ol style="list-style-type: none"> <li>1. The deputations generally supported the recommendations of the Working Group on Differentiation between Medical Procedures and Beauty Services ("the Working Group") that several types of cosmetic procedures should be performed only by registered medical practitioners or registered dentists because of their inherent risks. These procedures included those involving injections, mechanical or chemical exfoliation of the skin below the epidermis, hyperbaric oxygen therapy and dental bleaching.</li> <li>2. Some deputations, including Association of Private Medical Specialists of Hong Kong, Hong Kong Private Hospitals Association, Hong Kong Dental Association and Consumer Council, called for an early implementation of the recommendations proposed by the Working Group so as to protect patient safety.</li> <li>3. Taking into account the potential risk of colon hydrotherapy which were currently provided by some beauty parlours to their clients, Li Ka Shing Faculty of Medicine of The University of Hong Kong agreed with the recommendation of the Steering Committee on Review of Regulation of</li> </ol>

Organization/Individual	Major views and concerns
<ul style="list-style-type: none"> <li>• The Hong Kong College of Otorhinolaryngologists</li> <li>• Hong Kong Dental Association</li> <li>• Hong Kong Doctors Union</li> <li>• Hong Kong Private Hospitals Association</li> <li>• Hong Kong Sanatorium &amp; Hospital</li> <li>• The Hong Kong Society of Dermatology and Venereology</li> <li>• Hong Kong Society of Plastic, Reconstructive &amp; Aesthetic Surgeons</li> <li>• Hospital Authority</li> <li>• Li Ka Shing Faculty of Medicine, The University of Hong Kong</li> <li>• The Society of Hospital Pharmacists of Hong Kong</li> </ul>	<p>Private Healthcare Facilities that the Administration should step up control over the procedure.</p> <ol style="list-style-type: none"> <li>4. While tattooing and piercing were traditionally deemed as non-medical procedures, Hong Kong Sanatorium &amp; Hospital noted with concern that they were exempt from being regarded as a medical procedure. Given that body tattooing and piercing involved skin puncture and injection into skin, the deputation held the view that practitioners performing the procedure should be subject to registration and training requirements.</li> <li>5. Hong Kong Academy of Medicine and The Society of Hospital Pharmacists of Hong Kong were of the view that medical practitioners performing high-risk cosmetic procedures should be properly trained and possess relevant experience. The former also considered that such procedures should be performed in regulated settings.</li> <li>6. The Hong Kong Society of Dermatology and Venereology and the Society of Hospital Pharmacists of Hong Kong further considered that a registration or classification system should be set up to identify the risk level of the high-risk cosmetic procedures. Patients should be made aware of the inherent risks involved in these procedures, so as to make informed decisions before undergoing the procedures.</li> </ol>
<ul style="list-style-type: none"> <li>• The Hong Kong Medical Association</li> </ul>	<ol style="list-style-type: none"> <li>1. While not opposing the recommendations made by the Working Group, the deputation was concerned that these recommendations were only administrative guidelines. In its view, in the absence of a clear definition of the term "Medical Treatment" in Section 28 of the Medical Registration Ordinance (Cap. 161), it would be difficult to take legal actions against those non-medical practitioners performing cosmetic procedures that</li> </ol>

<b>Organization/Individual</b>	<b>Major views and concerns</b>
	involved injections and mechanical or chemical exfoliation.
<ul style="list-style-type: none"> <li>• The Provisional Hong Kong Academy of Nursing</li> </ul>	<ol style="list-style-type: none"> <li>1. The deputation considered that high-risk invasive procedures should only be delivered by trained and certified healthcare professionals at a regulated setting. Patients should be properly informed of the potential risks involved in the medical treatments or procedures, so as to facilitate the making of informed decision.</li> </ol>
<ul style="list-style-type: none"> <li>• Hong Kong Medical and Healthcare Device Industries Association</li> </ul>	<ol style="list-style-type: none"> <li>1. The deputation held the view that the differentiation of medical treatment and beauty service involved professional medical judgment. Factors such as the aim, the process, the outcome and the device(s) to be used should be taken into account in determining whether a procedure was a medical treatment or beauty service. The Administration should make codified classification after consulting various professional bodies.</li> </ol>
<ul style="list-style-type: none"> <li>• Beautiful Locations Limited</li> <li>• Beautisky International Limited</li> <li>• The Beauty Company, Limited</li> <li>• Elsa Pun Beauty &amp; Slimming Institute</li> <li>• Farida Professional Academy of Aesthetics</li> <li>• Federation of Beauty Industry (H.K.)</li> <li>• Full Moral Technology &amp; Cosmetic</li> <li>• Hong Kong Beauty and Fitness Professionals General Union</li> <li>• Hong Kong Hair &amp; Beauty Merchants Association</li> <li>• Hong Kong Qualified Standard Beauty Association</li> </ul>	<ol style="list-style-type: none"> <li>1. The deputations generally considered that the adverse incident in October 2012 involving invasive procedures provided by a beauty service company was caused by misconduct on the part of the doctors concerned and should be regarded as a medical incident. They expressed grave concern about the recommendations made by the Working Group which in their view, would result in over regulation of the beauty industry and have a negative impact on the business operation of beauty parlours and the livelihood of beauticians.</li> <li>2. Some deputations, including Hong Kong Hair &amp; Beauty Merchants Association, Farida Professional Academy of Aesthetics, the Beauty Company, Limited and Mandy Group Limited, considered that beauticians who had received proper training should be allowed to continue to perform</li> </ol>

<b>Organization/Individual</b>	<b>Major views and concerns</b>
<ul style="list-style-type: none"> <li>• Hong Kong International Professional Trainers Association</li> <li>• Mandy Group Limited</li> <li>• Pretty House Group</li> <li>• Service Industry General Union</li> <li>• 團結美容業界關注小組</li> </ul>	<p>those cosmetic procedures which were currently available at and provided by beauty parlours.</p>
<ul style="list-style-type: none"> <li>• Hong Kong Beauty Press Limited</li> </ul>	<p>1. The deputation opposed to the recommendations made by the Working Group. In its view, the views and concerns of the representatives from the beauty industry were not fully considered or addressed during the deliberation at the meetings of the Working Group.</p>
<b>Regulation of private healthcare facilities</b>	
<ul style="list-style-type: none"> <li>• The Society of Hospital Pharmacists of Hong Kong</li> </ul>	<p>1. The deputation urged the Administration to introduce regulatory control over private healthcare facilities providing high-risk medical treatment or procedures.</p>
<ul style="list-style-type: none"> <li>• The Hong Kong College of Pathologists</li> </ul>	<p>1. The deputation expressed concern about the regulation of medical laboratories and urged the Administration to put in place a statutory regulatory framework to cover the registration and operation of private medical laboratories. All these laboratories should be supervised by qualified medical professionals.</p>
<b>Regulation of medical devices</b>	
<ul style="list-style-type: none"> <li>• The College of Surgeons of Hong Kong</li> <li>• Consumer Council</li> <li>• Faculty of Medicine, The Chinese University</li> </ul>	<p>1. Pointing out that a voluntary Medical Device Administrative Control System had long been put in place since November 2004, the deputations urged the Administration to expeditiously introduce a statutory regulatory</p>

<b>Organization/Individual</b>	<b>Major views and concerns</b>
<p>of Hong Kong</p> <ul style="list-style-type: none"> <li>• Hong Kong College of Community Medicine</li> <li>• Hong Kong Doctors Union</li> </ul>	<p>framework for medical devices to protect public health.</p> <p>2. The Consumer Council was of the view that a risk-based approach should be adopted whereby the level of control and the requirements on the operators would be proportional to the degree of risk classified for medical devices.</p>
<ul style="list-style-type: none"> <li>• Li Ka Shing Faculty of Medicine, The University of Hong Kong</li> </ul>	<p>1. While expressing support for the introduction of a new regulatory framework for the control of the use of energy-emitting devices, the deputation considered that an expert panel should be set up under the future regulatory regime to advise on the risk level and the appropriate control in order to keep pace with new cosmetic procedures which involved the application of innovative devices.</p>
<ul style="list-style-type: none"> <li>• The Hong Kong College of Otorhinolaryngologists</li> <li>• Hong Kong Medical and Healthcare Device Industries Association</li> <li>• The Hong Kong Physiotherapy Association</li> </ul>	<p>1. The deputations considered that high-risk medical devices and energy-emitting devices should be operated by professionally qualified persons with appropriate and proper training.</p>
<ul style="list-style-type: none"> <li>• Hong Kong College of Dermatologists</li> <li>• Hong Kong College of Physicians</li> <li>• Hong Kong Society of Plastic, Reconstructive &amp; Aesthetic Surgeons</li> <li>• Hong Kong Surgical Laser Association</li> </ul>	<p>1. The deputations considered that the use and operation of energy-emitting devices should be restricted to registered medical practitioners who were trained in making diagnosis and delivering appropriate medical treatment, including managing the risks and complications arising from invasive or high risk procedures.</p>
<ul style="list-style-type: none"> <li>• Asia Pacific Beauty Group Limited</li> <li>• Beautiful Locations Limited</li> </ul>	<p>1. The deputations expressed grave concern over the introduction of legislation to regulate medical devices which, in their views, would impose</p>

Organization/Individual	Major views and concerns
<ul style="list-style-type: none"> <li>• The Cosmetic &amp; Perfumery Association of Hong Kong</li> <li>• Hong Kong Association of Professional Aestheticians International</li> <li>• Hong Kong Beauty and Fitness Professionals General Union</li> <li>• Hong Kong Beauty and Hair Care Employees' Union</li> <li>• Hong Kong Beauty Management &amp; Development Association</li> <li>• Hong Kong Beauty Press Limited</li> <li>• Hong Kong Hair &amp; Beauty Merchants Association</li> <li>• Hong Kong Hair Dressing &amp; Make-up Trade Workers General Union</li> <li>• Hong Kong International Professional Trainers Association</li> <li>• Ms LEUNG Kwok-ying</li> </ul>	<p>an adverse impact on the beauty industry, including the traders of medical devices, and affect the livelihood of beauticians.</p> <ol style="list-style-type: none"> <li>2. Some deputations, including the Cosmetic &amp; Perfumery Association of Hong Kong, Hong Kong Association of Professional Aestheticians International, Hong Kong Beauty and Fitness Professionals General Union, Hong Kong Beauty Press Limited and Hong Kong Hair Dressing &amp; Make-up Trade Workers General Union, urged the Administration to engage the beauty industry and the public in formulating the new regulatory regime for medical devices.</li> <li>3. There was a view from Hong Kong Beauty and Hair Care Employees' Union that over regulation would reduce consumer choice of affordable advanced cosmetic procedures which involved the use of devices which emitted different forms of energy.</li> </ol>
<ul style="list-style-type: none"> <li>• Asia Pacific Beauty Group Limited</li> <li>• Beautiful Locations Limited</li> <li>• Beautisky International Limited</li> <li>• The Beauty Company, Limited</li> <li>• The Beauty Group International Limited</li> <li>• Beauty Industry Reform Research and Development Committee</li> <li>• Democratic Alliance for the Betterment and Progress of Hong Kong</li> <li>• Democratic Party</li> </ul>	<ol style="list-style-type: none"> <li>1. The deputations considered that the use and operation of cosmetic-related medical devices (such as high-power medical lasers, intense pulsed light equipment, radiofrequency devices) should not be confined to registered medical personnel only. They pointed out that beauticians who operated such devices had received local or overseas aesthetic training and/or undergone training sessions provided by traders. In their views, beauticians who were properly trained and had their skill competencies proven through tests or examination should be allowed to continue to use such devices.</li> <li>2. To enhance the professional level of beauticians, Hong Kong International</li> </ol>

<b>Organization/Individual</b>	<b>Major views and concerns</b>
<ul style="list-style-type: none"> <li>• Elsa Pun Beauty &amp; Slimming Institute</li> <li>• Federation of Beauty Industry (H.K.)</li> <li>• Hong Kong Beauty and Hair Care Employees' Union</li> <li>• Hong Kong International Professional Trainers Association</li> <li>• NEO DERM (HK) Limited</li> <li>• Neo Skin Lab</li> </ul>	<p>Professional Trainers Association and Beauty Industry Reform Research and Development Committee called on the Administration to put in place a mechanism under which only those beauticians who met the stipulated requirements would be allowed to operate such equipment.</p>
<ul style="list-style-type: none"> <li>• Beauty Care and Hairdressing Training Board of Vocational Training Council</li> </ul>	<p>1. The deputation considered that a structured training programme developed on the basis of the Qualifications Framework ("QF") should be established. Only those persons, regardless of whether they were medical personnel or beauticians, who had undergone relevant trainings and passed the relevant tests would be qualified to provide beauty treatments of high risk in nature and operate cosmetic-related medical devices.</p>
<ul style="list-style-type: none"> <li>• Good Union Corporation Limited</li> </ul>	<p>1. The deputation expressed concern over the future statutory regulatory framework for medical devices, particularly in respect of the registration system and qualification requirement on the trainers of manufacturers who provided training to operators of medical devices.</p>
<ul style="list-style-type: none"> <li>• Pretty House Group</li> </ul>	<p>1. The deputation considered that high-risk medical devices should only be sold to medical practitioners, in order to control the use of these devices.</p>
<b>Regulation and development of the beauty industry</b>	
<ul style="list-style-type: none"> <li>• Civic Party</li> <li>• Hong Kong Chiropractors Association</li> <li>• Hong Kong Dental Association</li> </ul>	<p>1. The deputations considered that a mechanism should be put in place to regulate services and practice of beauty services companies. Hong Kong Doctors Union further considered that the health maintenance</p>

<b>Organization/Individual</b>	<b>Major views and concerns</b>
<ul style="list-style-type: none"> <li>• Hong Kong Doctors Union</li> </ul>	<p>organizations, most of which were owned by non-medical personnel, should also be subject to regulation.</p>
<ul style="list-style-type: none"> <li>• Beauty Industry Reform Research and Development Committee</li> <li>• Democratic Party</li> <li>• Farida Professional Academy of Aesthetics</li> <li>• Federation of Beauty Industry (H.K.)</li> <li>• Hong Kong Association of Professional Aestheticians International</li> <li>• Hong Kong Beauty Management &amp; Development Association</li> <li>• Hong Kong Beauty Press Limited</li> <li>• Hong Kong Hair &amp; Beauty Merchants Association</li> <li>• International CICA Association of Esthetics, CIDESCO Section China</li> <li>• NEO DERM (HK) Limited</li> </ul>	<ol style="list-style-type: none"> <li>1. The deputations were concerned about the development of beauty industry. They generally considered that many beauticians had received different kinds of trainings or acquired overseas qualifications on beauty care. Some beauticians met the requirements as set out in the Specification of Competency Standards of QF. In their views, the Administration should provide assistance to promote the professional development of beauticians and enhance the service standard of the beauty industry.</li> <li>2. The deputations urged the Administration to set up a steering committee to study the issues relating to the regulation and development of the beauty industry. The Democratic Party further proposed that the committee should be jointly led by relevant bureaux, namely the Commerce and Economic Development Bureau, Education Bureau, Food and Health Bureau and Security Bureau, so as to formulate appropriate policy and provide adequate support to the development of the beauty industry.</li> </ol>
<ul style="list-style-type: none"> <li>• Consumer Council</li> <li>• Vocational Training Council</li> </ul>	<ol style="list-style-type: none"> <li>1. The deputation considered that the Administration should provide assistance in promoting the education and training for beauticians in order to ensure the provision of safe beauty services to members of the public. They suggested the setting up of the continuing professional development programme under which the competence, skill and practical experience of beauticians were recognized.</li> </ol>



Organization/Individual	Major views and concerns
<b>Public education</b>	
<ul style="list-style-type: none"> <li>• Consumer Council</li> <li>• Hong Kong Academy of Medicine</li> <li>• Hong Kong Medical and Healthcare Device Industries Association</li> <li>• Li Ka Shing Faculty of Medicine, The University of Hong Kong</li> </ul>	<ol style="list-style-type: none"> <li>1. The deputation called on the Administration to step up public education to raise public awareness of the inherent risks of cosmetic procedures, so as to ensure that customers undergoing cosmetic procedures would make informed decisions.</li> </ol>
<b>Others</b>	
<ul style="list-style-type: none"> <li>• Civic Party</li> <li>• The Society of Hospital Pharmacists of Hong Kong</li> </ul>	<ol style="list-style-type: none"> <li>1. The deputation urged the Administration to step up its effort in carrying out inspection of those medical centres and beauty service providers providing cosmetic procedures.</li> </ol>
<ul style="list-style-type: none"> <li>• Civic Party</li> <li>• The College of Surgeons of Hong Kong</li> </ul>	<ol style="list-style-type: none"> <li>1. The deputation called on the Administration to step up their enforcement actions against misleading and fraudulent beauty services advertisement involving medical treatment and cosmetic procedures.</li> </ol>

<b><u>Name of Organization/ Individual</u></b>	<b><u>Submission [LC Paper No.]</u></b>
Asia Pacific Beauty Group Limited	LC Paper No. CB(2)552/13-14(04)
Beautisky International Limited	LC Paper No. CB(2)574/13-14(06)
Beauty Care and Hairdressing Training Board of Vocational Training Council	LC Paper No. CB(2)532/13-14(12)
Beauty Industry Reform Research and Development Committee	LC Paper No. CB(2)532/13-14(18)
Civic Party	LC Paper No. CB(2)574/13-14(07)
The College of Surgeons of Hong Kong	LC Paper No. CB(2)532/13-14(08)
Consumer Council	LC Paper No. CB(2)552/13-14(03)
The Cosmetic & Perfumery Association of Hong Kong	LC Paper No. CB(2)552/13-14(02)
Democratic Party	LC Paper No. CB(2)574/13-14(10)
Farida Professional Academy of Aesthetics	LC Paper No. CB(2)532/13-14(16)
Federation of Beauty Industry (H.K.)	LC Paper No. CB(2)552/13-14(01)
Full Moral Technology & Cosmetic	LC Paper No. CB(2)574/13-14(08)
Hong Kong Academy of Medicine	LC Paper No. CB(2)574/13-14(03)

<b><u>Name of Organization/ Individual</u></b>	<b><u>Submission [LC Paper No.]</u></b>
Hong Kong Association of Cosmetic Surgery	LC Paper No. CB(2)532/13-14(19)
Hong Kong Association of Professional Aestheticians International	LC Paper No. CB(2)532/13-14(11)
Hong Kong Beauty and Fitness Professionals General Union	LC Paper No. CB(2)532/13-14(04)
Hong Kong Beauty and Hair Care Employees' Union	LC Paper No. CB(2)574/13-14(05)
Hong Kong Beauty Management & Development Association	LC Paper No. CB(2)532/13-14(06)
Hong Kong Chiropractors Association	LC Paper No. CB(2)532/13-14(22)
Hong Kong College of Community Medicine	LC Paper No. CB(2)532/13-14(21)
The Hong Kong College of Family Physicians	LC Paper No. CB(2)532/13-14(14)
The Hong Kong College of Otorhinolaryngologists	LC Paper No. CB(2)597/13-14(01)
The Hong Kong College of Pathologists	LC Paper No. CB(2)532/13-14(07)
Hong Kong Doctors Union	LC Paper No. CB(2)532/13-14(09)
Hong Kong Hair & Beauty Merchants Association	LC Paper No. CB(2)532/13-14(13)
Hong Kong Hair Dressing & Make-up Trade Workers General Union	LC Paper No. CB(2)574/13-14(11)
Hong Kong International Professional Trainers Association	LC Paper No. CB(2)532/13-14(05)

<b><u>Name of Organization/ Individual</u></b>	<b><u>Submission [LC Paper No.]</u></b>
Hong Kong Medical and Healthcare Device Industries Association	LC Paper No. CB(2)532/13-14(03)
The Hong Kong Medical Association	LC Paper No. CB(2)574/13-14(01)
Hong Kong Qualified Standard Beauty Association	LC Paper No. CB(2)552/13-14(05)
Hong Kong Society of Plastic, Reconstructive & Aesthetic Surgeons	LC Paper No. CB(2)574/13-14(04)
Hong Kong Surgical Laser Association	LC Paper No. CB(2)552/13-14(06)
International CICA Association of Esthetics, CIDESCO Section China	LC Paper No. CB(2)532/13-14(10)
NEO DERM (HK) Limited	LC Paper No. CB(2)532/13-14(17)
Neo Skin Lab	LC Paper No. CB(2)597/13-14(02)
The Provisional Hong Kong Academy of Nursing	LC Paper No. CB(2)532/13-14(15)
The Society of Hospital Pharmacists of Hong Kong	LC Paper No. CB(2)574/13-14(02)
Ms LEUNG Kwok-ying	LC Paper No. CB(2)574/13-14(09)